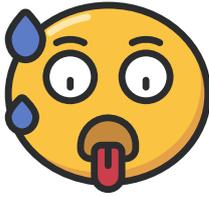


NAME:

DATE:

Feelings

Look at the picture and circle the correct word.

	<input type="text" value="happy"/> <input type="text" value="sad"/>		<input type="text" value="hungry"/> <input type="text" value="angry"/>
	<input type="text" value="tired"/> <input type="text" value="sad"/>		<input type="text" value="bored"/> <input type="text" value="happy"/>
	<input type="text" value="tired"/> <input type="text" value="thirsty"/>		<input type="text" value="sad"/> <input type="text" value="sick"/>
	<input type="text" value="scared"/> <input type="text" value="angry"/>		<input type="text" value="angry"/> <input type="text" value="hungry"/>
	<input type="text" value="thirsty"/> <input type="text" value="bored"/>		<input type="text" value="hot"/> <input type="text" value="cold"/>